Kentucky e-Health Network Board December 2, 2009 Minutes

Meeting No. 33

Capitol Annex - Room 131

3:00 pm - 4:30 pm

Board Members in Attendance:

Dr. Larry Cook, Co-Chair – University of Louisville
Dr. Carol Steltenkamp, Co-Chair – University of Kentucky
Phil Baughn - Commonwealth Office of Technology
David Bolt – Physicians Practice Managers
Ron Carson, Proxy for Robert King – Kentucky Council on Postsecondary Education
Murray Clark – Kentucky Hospital Association
Deborah Clayton – Kentucky Department of Commercialization & Innovation
Rep. Bob DeWeese – House of Representatives
Dr. William Hacker - Kentucky Department for Public Health
Betsy Johnson – Kentucky Department for Medicaid Services
Bruce Klockars – Kentucky Hospital Association & Rural Hospitals
Randy McCleese, Proxy for Dr. Kim Williams – Kentucky Medical Association
Janie Miller – Secretary, Kentucky Cabinet for Health & Family Services
Al Perkins, Proxy for Sharon Clark – Kentucky Department of Insurance

Absent:

Dr. David Bensema – Kentucky Medical Association Senator Julie Denton - Senate Larry Mott – Business with e-Strategy Senator Katie Stine – Senate President Pro Tem Rep. Tommy Thompson – House of Representative

Staff:

April Smith - Project Manager Donna Veno - Executive Assistant

Welcome and Introductions

The meeting was called to order by Dr. Larry Cook, Co-Chair. Members were asked to introduce themselves and report on any current events in e-health.

Review and Approval of August Board Minutes

Deborah Clayton moved to approve the August board minutes; Janie Miller seconded the motion. Motion carried.

Communications

Harmonizing State Privacy Law Collaborative

Dr. Julie Costich from the University of Kentucky presented an update on Phase 3 of the Health Information Security and Privacy Collaboration. It was convened under the auspices of the Office of the National Coordinator and the Agency for Healthcare Research and Quality and managed by RTI. The funding for this project ended on July 31, 2009. The final scope of work being reported on was to recommend elements of a model health information exchange law and it was based on a review of legislation from Florida, Minnesota, New Mexico, and Rhode Island.

Preliminary Recommendations Include:

- State Health Information Exchange (HIE) legislation should have provisions that relate explicitly to electronic medical/health that give them legal recognition, that specify retention requirements and authorize electronic signatures.
- Patient authorization and consent is a hugely complicated area. Oklahoma and Florida are
 working on universal authorization forms. A general authorization form is being considered, and a
 separate form for the especially sensitive health information dealing with behavioral health,
 substance abuse, and HIV/AIDS. Secondary disclosure is a huge issue as well. Texas state law
 appears to prevent or forbid secondary disclosure without a second authorization.

Health Information Exchange – Specific Provisions

The legal structure and technical structure should use technology-neutral terms so legislation does not have to amend when new standards and best practices are adopted. A provision to allow patients to opt-out versus opt-in was recommended. There is a recommendation to request provider attestations or warrants of authorization; which is a key component of the national health information standards. There was also a recommendation for compensatory damages to patients for fraudulent authorization.

Definitions

Health information exchange technical definition: use technology neutral terms to define technical structure and "enterprise integration" definition in ARRA.

Electronic medical/health record: suggest states reference or incorporate ARRA definitions as agreed by stakeholders. Related terms in ARRA include electronic health record qualified electronic health record, certified health information technology.

Other Matters

- States will need to address provider liability when patients opt-out in whole or in part.
- Identify what records will or will not be shared by opting out of the health information exchange.
- Determine how physicians will provide comprehensive patient assessments without access to comprehensive patient information.

Medicaid Transformation Grant Project Update

Kathy Frye, Deputy Executive Director and Chief Information Officer, April Smith, e-Health Project Manager and Sandeep Kapoor, Chief Technology Officer of the Cabinet for Health and Family Services presented an update to the board on the Medicaid Transformation Grant Project. A \$4.9M grant was awarded in February 2007. A Request for Proposal was issued in December 2008 for Phase I of the KHIE and was awarded in September 2009 to ACS. MTG scope was realigned based on emerging national health information exchange efforts. Developments of the foundational components for building the statewide health information exchange are currently underway. A projected implementation date of the second quarter of 2010 is expected.

Foundational Components Include:

- Master Patient Index and Record Locater Service
- Standards based, EMR agnostic interoperability approach
- Role based security
- Hybrid model allowing for federated data stores
- Extensive logging
- ePrescribing (at no cost for physician offices)
- Lab interfaces (State lab and one private lab)
- Clinical decision support
- "EMR Light" (available at no cost for physician offices)

MTG Current Status

- ACS Team is on site full-time in Kentucky
- Cabinet staff continue to work daily with ACS staff
- KHIE project is currently under the direction of the Office of Administrative and Technology Services Executive Director, Frank Lassiter

- Meetings with hospitals are underway
- Meetings with MMIS and Pharmacy Benefit vendors are underway
- Implementation Project Plan completed
- Requirements sessions underway
- Companion Guide for Continuity of Care Document (CCD) has been completed by ACS and is under review by CHFS
- Interoperability forum will be starting up
- Connectivity guidelines for KHIE have been developed

Hospital connectivity quidelines

- Silver connectivity a push of the Continuity of Care document
- Gold connectivity a push and pull of the Continuity of Care document
- Platinum connectivity includes a XDS (Cross Enterprise Document Exchange) repository which will allow for a robust health information exchange.

A website has been created for the Governor's Office of Electronic Health Information and can be accessed at http://chfs.ky.gov/os/goehi/khie.htm. A global email is available for questions at KHIE@ky.gov.

Providers will use the same companion guide as the hospitals for connectivity. Business Associate Agreements will assure that providers will meet all requirements for protecting health information. There will be a single sign on and user provisioning and authorization. All interfaces between system to system are based on the X509 certificates, and every transmission is secured with passwords and user IDs.

Kentucky e-Health Corporation

The Kentucky e-Health Corporation was formed to be used as a vehicle to this board to assist with state procurement as well as to be a vehicle to accept and retain private monies. An opinion was obtained through the Commonwealth legal services that these advantages were not realizable through the E-Health Corporation. This board deliberated and voted to dissolve the e-Health Corporation. Secretary of State Trey Grayson dissolved the e-Health Corporation on November 3, 2009.

E-Health Summit

The e-Health Summit was held in September at the Hyatt Regency in Louisville. The great majority of the attendees felt that an annual e-health summit is beneficial. Future topics include security, privacy and interoperability, final rules from the federal government on HIE, case studies of the state's HIE initiatives, HITECH implementation and interpretation guidelines, and an overview of Kentucky's HIE direction.

2010 Meeting Schedule

The board discussed moving board meetings from monthly to quarterly. The current statute states the board shall meet monthly. The statute would need to be amended and could possibly be included in the CHFS Reorganization Bill. The board will continue to monitor the situation.

Next Board Meeting

The next meeting of the board is scheduled for January 6, 2010, from 3:00 – 4:30 pm, at the Capitol Annex, Room 131.

Submitted by Donna Veno December 2009